



**UTAH STATE COURTS
COURT INTERPRETER PROGRAM
ENGLISH/SPANISH LANGUAGE DIAGNOSTIC TEST
JULY 14, 2006 (or)
JANUARY 12, 2007**

REGISTRATION FORM

Name: _____

Address: _____
(Street Address)

(City and State) (Zip Code)

Phone: _____

Social Security #: _____

Email Address: _____

Please register me for the English/Spanish Language Diagnostic Test on the following date
(*please check one*):

☐ July 14, 2006 ☐ January 12, 2007

Please register me at the following location (*please check one*):

☐ Logan ☐ Ogden ☐ Salt Lake City
☐ Provo ☐ St. George ☐ Richfield
☐ Moab ☐ Vernal

You will receive a letter confirming your registration before the test. The letter will give you specific information about location, parking, etc.

The English/Spanish Language Diagnostic Test is a multiple-choice test on general English vocabulary and translations of short English sentences.

Please return this registration form along with a check for **\$25.00** made out to the **ADMINISTRATIVE OFFICE OF THE COURTS (AOC)** at least one week before the test to:

**Rosa Oakes
Administrative Office of the Courts
P.O. Box 140241
Salt Lake City, UT 84114-0241
Fax: 801-578-3843**